Follow instructions fully or we cannot process your form. Be sure to sign and date the certification statement on page 2. If you have any questions, call the office that gave you the form.

The Standard Form 86 (SF 86), *Questionnaire for National Security Positions*, is completed by persons performing, or seeking to perform, national security duties for the Federal Government. The SF 86 is used by the Office of Personnel Management and by other Federal agencies to initiate the background investigation required to determine placement in national security positions in accordance with 42 U.S.C. 2165, 22 U.S.C. 2585, E.O. 10450, Security Requirements for Government Employment, issued April 27, 1953, and E.O. 12968, Access to Classified Information, issued August 2, 1995. There are many situations where individuals are required to fill out a new SF 86 when the sole purpose is to determine if any information on a previously executed SF 86 has changed. This requires extensive work by the individual even if nothing has changed. The SF 86C is a certification document that allows the reporting of changes in previously reported information on the SF 86. This certification will be in lieu of completing a new SF 86 and will allow the individual to indicate that there have been no changes in the data provided on the most recently filed SF 86. Or it will allow the individual to easily provide new or changed information. No investigation will be initiated based solely on the execution of this form.

Your Social Security Number (SSN) is needed to keep our records accurate, because other people may have the same name and birthdate. Public Law 104-134 (April 26, 1996) asks Federal agencies to use this number to help identify individuals in agency records. Giving us your SSN or any other information is voluntary. However, if you do not give us your SSN or any other information requested, we cannot process your application. Incomplete addresses and ZIP Codes may also slow processing.

Privacy Act Statement

Solicitation of this information is authorized by Executive Orders 10450 and 12968 and 5 CFR 732. The U.S. Government conducts background reinvestigations to establish that individuals continue to be eligible for positions involving national security or special nuclear information or material. We may share this information with other Federal agencies; Congress (when requested); a court of competent jurisdiction, news media and the general public when the disclosure would be in the public interest and would not constitute an unwarranted invasion of privacy; public authorities responsible for enforcing, investigating or prosecuting violations of statute, rule, regulation or order (except as noted in Question 24 on the SF 86); and, in compliance with the National Security Act of 1947, the CIA Act of 1949, Executive Order 12333, and other such acts as may be promulgated. If you do not supply the requested information, the processing of your investigation may stop and any clearances or access you have may be terminated.

Public Burden Statement

We think this form takes an average 15 minutes to complete, including the time for reviewing instructions, getting the needed data, and reviewing the completed form. Send comments regarding our estimate or any other aspect of this form, including suggestions for reducing completion time, to the U.S. Office of Personnel Management, OPM Forms Officer, Paperwork Reduction Act (3206-0005), Washington, D.C. 20415-7900. OPM may not collect this information, and you are not required to respond, unless this number is displayed. **Do not send your completed form to this address.**

Standard Form 86 Certification

INSTRUCTIONS: PLEASE TYPE OR LEGIBLY PRINT YOUR ANSWERS IN BLACK INK. Referencing information contained in your **most recent Standard Form 86** (SF 86), *Questionnaire for National Security Positions,* (OMB No. 3206-0005), or information disclosed upon the **date of your last background investigation,** complete this Form. All questions on this Form must be answered. Any changes that you make to this Form after you sign it must be initialed and dated by you. The U.S. Criminal Code (Title 18, section 1001) provides that knowingly falsifying or concealing a material fact is a felony which may result in fines of up to \$10,000 and/or 5 years imprisonment, or both.

Do not provide information you have already provided on your most recent SF 86. Any *Yes* responses under Blocks 2 and/or 3 must be explained in Block 4. If additional space is needed, use a blank piece of paper. Each blank piece of paper must contain your **name**, **date**, and **Social Security Number** at the top of the page. Conclude by *certifying* the accuracy of your answers in Block 5, the Certification Note. You may request an interview with a government security officer/agent if you have questions pertaining to Blocks 2 and 3. Contractors shall inform employees that this Certification Form may be completed in private and returned to security personnel in a sealed envelope. It is *IMPORTANT* that you keep your most recent Standard Form 86 and a *COPY* of this certification form in your personal records file for immediate retrieval.

Block 1 - Identification

| Full Name (Last, First, | Middle, Maiden) | Social Security Number (SSN) | | | |
|----------------------------|-----------------|------------------------------|------|----|------|
| | | | | | |
| Date of Birth (mm/dd/yyyy) | | Place of Birth | | | |
| Telephone Numbers | Work | | Home | Er | nail |

STOP! Check this box if you wish to consult with a government security officer before completing Blocks 2 and/or 3.

Block 2 - Part 1 of the Standard Form 86

Instructions: The following **Sections**, noted in Blocks 2 and 3, correlate with your SF 86. If you report **no change** to a Section, place an "X" in the **No** box. If there is a **change** to report, place an "X" in the **Yes** box. All **Yes** answers **must** be explained under Block 4, Explanation/Remarks.

| Yes | No | |
|-----|----|---|
| | | Section 5. (Other Names Used) |
| | | Section 6. (Other Identifying Information, Height/Weight/Hair/Eye/Sex M-F) (Not Applicable) |
| | | Section 7. (Telephone Numbers) (Provide under Block 1, above) |
| | | Section 8. (Citizenship) |
| | | Section 9. (Where You Have Lived) |
| | | Section 10. (Where You Went To School) |
| | | Section 11. (Your Employment Activities) |
| | | Section 12. (People Who Know You Well) (Not Applicable) |
| | | Section 13. (Your Spouse) |
| | | Section 14. (Your Relatives and Associates) |
| | | Section 15. (Citizenship of Your Relatives and Associates) |
| | | Section 16. (Your Military History) |
| | | Section 17. (Your Foreign Activities) |
| | | Section 18. (Foreign Countries You Have Visited) |
| | | Standard Form 86C |

| Block 3 - Part 2 of the Standard Form 86 | | | | | |
|--|----|--|--|--|--|
| Yes | No | | | | |
| | | Section 19. (Your Military Record) | | | |
| | | Section 20. (Your Selective Service Record) (Not Applicable) | | | |
| | | Section 21. (Your Medical Record) | | | |
| | | Section 22. (Your Employment Record) | | | |
| | | Section 23. (Your Police Record) | | | |
| | | Section 24. (Your Use of Illegal Drugs and Drug Activity) | | | |
| | | Section 25. (Your Use Of Alcohol) | | | |
| | | Section 26. (Your Investigations Record) | | | |
| | | Section 27. (Your Financial Record) | | | |
| | | Section 28. (Your Financial Delinquencies) | | | |
| | | Section 29. (Public Record Civil Court Actions) | | | |
| | | Section 30. (Your Association Record) | | | |

Block 4 - Explanation/Remarks

Before each answer, identify the Standard Form 86 *section number* associated with your answer. *For example,* if you have had a *change of residence,* place a 9, and then list your new address.

Check this block if additional comments are attached. Place your name, date, and SSN at the top of each page.

STOP - Please check this block if your SF-86, Questionnaire for National Security Positions, is attached.

Block 5 - Certification Note

I certify that the above information includes all changes to my most recent Standard Form 86, dated______, or since my last investigation, dated ______, *(per instruction from your sponsor, note only one date).* Changes, if any, are explained under Block 4. I make this certification to the best of my knowledge and belief, and I sign this Note in good faith. I understand that a knowing and willful false statement on this Certification Form can be punished by fine or imprisonment or both. (See United States Code, Title 18, Section 1001).

Signature (Sign in ink)

Date